



Commonwealth  
of Massachusetts

# Form CPF M 102: Campaign Finance Report

**Municipal Form**  
Office of Campaign and Political Finance

CITY OF CAMBRIDGE  
ELECTION COMMISSION

File with:  
City or Town Clerk or Election Commission

2004 JAN 21 A 10:01

Please print or type all information, except signatures.

## Fill in dates:

Reporting Period Beginning Month 10 Date 25 Year 2003 Ending Month 12 Date 31 Year 2003

## Type of report: (Check one)

☐ 8th day preceding preliminary ☐ 8th day preceding election ☐ 30 day after election ☒ Year-end report ☐ dissolution

Nancy G. Walser

Full Name of Candidate (if applicable)

School Committee

Office Sought and District

335 Huron Ave

Residential Address

Cambridge MA

617-868-1973 Tel. No. (optional)

Committee to Elect Nancy Walser

Committee Name

Barbara Brammer

Name of Committee Treasurer

335 Huron Ave

Committee Mailing Address

Cambridge MA 02138

617-868-1973 Tel. No. (optional)

## SUMMARY BALANCE INFORMATION:

Line 1: Ending balance from previous report

\$ 637.08

637.08

Line 2: Total receipts this period (page 2, line 11)

\$ 6604.22

6604.22

Line 3: Subtotal (line 1 plus line 2)

\$ 7241.30

7241.30

Line 4: Total expenditures this period (page 3, line 14)

\$ 7042.04

7042.04

Line 5: Ending balance (line 3 minus line 4)

\$ 199.26

199.26

Line 6: Total in-kind contributions this period (page 4)

\$ -0-

-0-

Line 7: Total (all) outstanding liabilities (page 4)

\$ 8462.01

8462.01

Line 8: Name of bank(s) used Cambridge Trust

## Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Barbara A. Brammer

Treasurer's signature (in ink)

1/20/04

Date

## FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

### Affidavit of Candidate: (check 1 box only)

☐ Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

☐ Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

N. Walser

Candidate signature (in ink)

1/16/04

Date

## SCHEDULE A: RECEIPTS

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.*

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
Line 9: Total receipts in excess of \$50 (or listed above)		2010	-
Line 10: Total receipts \$50 and under* (not listed above)		245	-
Line 11: TOTAL RECEIPTS IN THE PERIOD		2255	-

See Schedule

Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

\* new loans  
4349.22  
6609.82



## SCHEDULE B: EXPENDITURES

*M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.*

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

[illegible]

See Schedule

**Line 12: Expenditures over \$50**

**Line 13: Expenditures \$50 and under\***

**Line 14: TOTAL EXPENDITURES**

**Enter on page 1, line 4**

6972.04  
70.00  
7042.04

\*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	
			Line 17: Total In-kind	

\* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
10/03	Nancy Walser	335 Huron Ave Camb 02138	Printing Website Meeting	2927.07
10/03	Barbara Brammer	41 Sargent St Camb 02140	Postage Cash Kick-off	1422.15
previously reported	Nancy Walser	335 Huron Ave Camb 02138	previous balance	4112.79*
				4112.79*
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	4349.22 new
				8462.09



**OFFICE OF CAMPAIGN AND POLITICAL FINANCE**

## DISCLOSURE OF ASSETS STATEMENT

Name of Committee \_\_\_\_\_

Date of Report \_\_\_\_\_

**Asset** means any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at time of acquisition.

**All assets of the committee must be disclosed if you are filing this form for the first time.**

Asset (1)	Date and Where Acquired	Present Location	Manner Acquired	Cost (P) Value (I) (2)

- (1) Include year and make when applicable.  
(2) Attach statement of how value is determined and include in cost column if acquired by In-Kind Contribution.  
(P) Purchase.  
(I) In-Kind Contribution.

I certify that this statement is true, accurate and complete. Signed under the penalties of perjury

1/16/04  
Date

Date \_\_\_\_\_

**Treasurer's Signature**

Date \_\_\_\_\_

02/89

**OFFICE OF CAMPAIGN & POLITICAL FINANCE  
DISCLOSURE OF ASSETS STATEMENT**

**Schedule E**

**Side 2**

This part should be completed by those committees who have filed this form in a prior year. Committees completing this part must list all assets acquired since the end of the reporting period covered by the last Schedule E.

Assets Acquired During the Reporting Period — Part A

indicate if none ☒

Asset (1)	Date and Where Acquired	Present Location	Manner Acquired	Cost (P) Value (I) (2)
				— 0 —

Assets Disposed of During the Reporting Period — Part B

indicate if none ☒

Listing of any assets sold, traded or retired during the period covered by this report that has a cost/value at time of acquisition of \$1000 or more.

Date of Disposition	Manner of Disposition	Disposition to: Name and Address	Disposition Value
			— 0 —





10/28/2003 Amerimail	39 Concord St., No. Reading, MA 01864	Postage	1,800.00
12/5/2003 Amerimail	39 Concord St., No. Reading, MA 01864	Postage	1,286.45
10/27/2003 Cambridge Offset Printing	56 Creighton St., Cambridge, MA 02140	Printing	3,249.37
1/1//03 - 9/30/03 Cambridge Trust		Bank fees	43.72
12/1 - 12/31/2003		Web Page	300.00
9/9/2003 USPS	Porter Square	Postage	292.50
		Misc.	6,972.04
		Misc.	70.00
		Total	7,042.04